



ARKANSAS INDIVIDUAL INCOME TAX CHECK-OFF CONTRIBUTIONS

Primary's legal name	Primary's social security number
Mailing address	ł
City	State ZIP
SEE INSTRUCTIONS ON REVERS	E SIDE OF THIS FORM
1. ARKANSAS DISASTER RELIEF PROGRAM	• \$
\$1 \$5 \$10 \$20 <u>Enter amount</u>	Your Total Refund
2. ARKANSAS GAME AND FISH FOUNDATION	• \$
\$1 \$5 \$10 \$20 <u>Enter amount</u>	Your Total Refund
3. ARKANSAS SCHOOL FOR THE BLIND/SCHOOL FOR THE DEAF	
\$1\$5\$10\$20	<u>Your Total Refund</u>
Enter amount	
4. BABY SHARON'S CHILDREN'S CATASTROPHIC ILLNESS PROGRAM	• \$
Enter amount	
5. ORGAN DONOR AWARENESS EDUCATION PROGRAM	
\$1 \$5 \$10 \$20 Enter amount	Your Total Refund
6. AREA AGENCIES ON AGING PROGRAM	• \$
\$1 \$5 \$10 \$20 <u>Enter amount</u>	Your Total Refund
7. MILITARY FAMILY RELIEF PROGRAM	• \$
\$1 \$5 \$10 \$20 <u>Enter amount</u>	Your Total Refund
8. NEWBORN UMBILICAL CORD BLOOD INITIATIVE	• \$
\$1 \$5 \$10 \$20	Your Total Refund
Enter amount	
9. LAW ENFORCEMENT FAMILY RELIEF TRUST FUND	······•● □ <u>Your Total Refund</u>
ψ1ψ3ψ10ψ20 Enter amount	
10. ARKANSAS BRIGHTER FUTURE FUND PLAN ACCOUNT (Formerly A	R529 College Investing Plan)
	• \$
Account Number:	
\$25 \$50 \$100 <u>Enter amount</u>	<u>Your Total Refund</u>
Account Number:	• \$
☐ \$25	<u>Your Total Refund</u>
Enter amount	
11. TOTAL CHECK-OFF CONTRIBUTIONS	\$